

Work Order ID 121176

June-16-14 2:25:23 PM

121176

Page 1

Item ID: D3756-041 Accept ***N900040100*** Setup Start ***NS1***
Revision ID: Stop ***NS2***
Item Name: Cushion
Start Date: 6/16/14 Start Qty: 2.00 ***2*** Cust Item ID:
Required Date: 6/16/14 Req'd Qty: 2.00 ***2*** Customer:
Reference:

Approvals: Process Plan: MLJ Date: 1406-18 Tooling: _____ Date: _____ Run Start ***NR1***
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D3754	Rev D								
D3756	Rev C								

100 PURCHASING 0.00

100

Purchasing

Purchasing

Memo

Issue P/O: 24699

Manufacture D3754-1as per Dwg D3754

Upholster as per Dwg D3756

Supplier: Aerotex

Material release note is required

0.00

CL 14/06/20 2

110

Receive & Inspect for Damage & Mat'l Certs

0.00

110

Packaging

Packaging

Memo

0.00

P 14/7/4 (2)

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width:15%;">Skid-tube <input type="checkbox"/></td> <td style="width:15%;">Crosstube <input type="checkbox"/></td> <td style="width:15%;">Water Jet <input type="checkbox"/></td> <td style="width:15%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design <input type="checkbox"/>									
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Handling/Pre <input type="checkbox"/>									
Material <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Offset/Setup <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Transport <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Work Order ID 121176

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121176

Page 2

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 Revision ID: Stop ***NS2***
 Item Name: Cushion
 Start Date: 6/16/14 Start Qty: 2.00 ***2*** Cust Item ID:
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 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	DAS 27 9-89	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120 *120* QC Quality Control	QC6- Inspect dimensions to drawing Memo	0.00 0.00	4777				2			
130 *130* Packaging Packaging	Identify as per dwg & Stock Location Memo	0.00 0.00	81625				2x		14-7-7	DAS 26 9-89
140 *140* QC Quality Control	QC21- Final Inspection - Work Order Release Memo	0.00 0.00					ML5		14-07-08	MF 14-7-7

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other _____ _____ _____
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Picklist Print

June-16-14 2:25:23 PM

Page 1

Work Order ID: 121176

121176

Parent Item: D3756-041

D3756-041

Parent Item Name: Cushion

Start Date: 6/16/14

Required Date: 6/16/14

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP: A08.11.17New issue EC verified by:DD IPP
Rev:B 10.04.13 as per Ec10-539 DD verified by:EC IPP Rev:C
10.05.03 remove velcro per comment (W/O 58261) DD verified :EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

D3756-041P

Purchased

No

110

Each

0.0000

1

2

D3756-041P

Cushion

44/7/9 (2)

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

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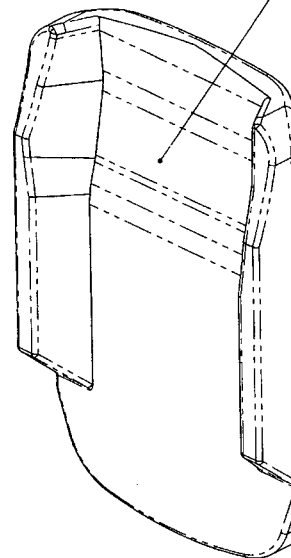
Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
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FAULT CATEGORY

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ITEM	QTY -041	QTY -1	PART NUMBER	DESCRIPTION
1	X		D3756-041	CUSHION
2	1	X	D3756-1	COVER
3	1		D3754-1	BACK FOAM
4		A/R	HOOK STRIP, 2"	3M SJ3418FR, 2" WIDE BEIGE OR D3800-1-200-600
5		A/R	LOOP STRIP, 1"	3M SJ3418FR, 1" WIDE BEIGE OR D3800-1-100-700
6		A/R	HOOK LOOP, 1"	APLIX 800, A800R0025H958-1, 1" WIDE BEIGE OR D3800-3-100-700
7		A/R	FABRIC	JACKSON GREY MIX
8	A/R	A/R	THREAD	BONDED POLYESTER, 14.2 lb BREAK STRENGTH, GREY COLOR
9	A/R		ADHESIVE	3M 1300 / 1300L RUBBER AND GASKET ADHESIVE OR SILAPRENE DC12906 SPRAY GRADE HPL CONTACT ADHESIVE

△
△
△
△
△



COVER SHOULD BE TIGHT TO
FOAM IN CONCAVE AREA SHOWN

12

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER

NO. 121176 MJS
140618

RELEASED
2010-03-23
MJS

D3756-041 CUSHION

NOTES:

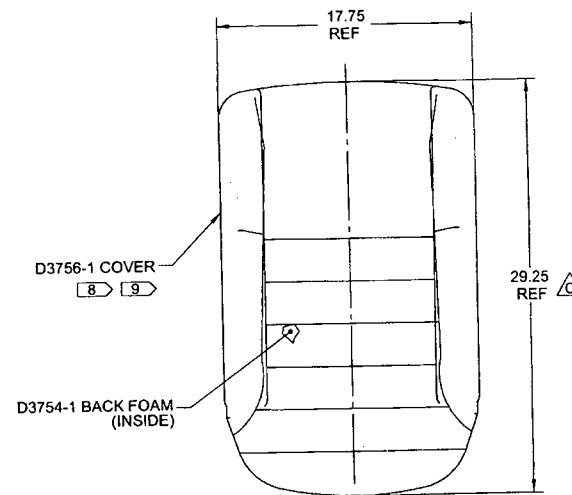
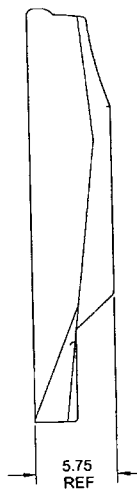
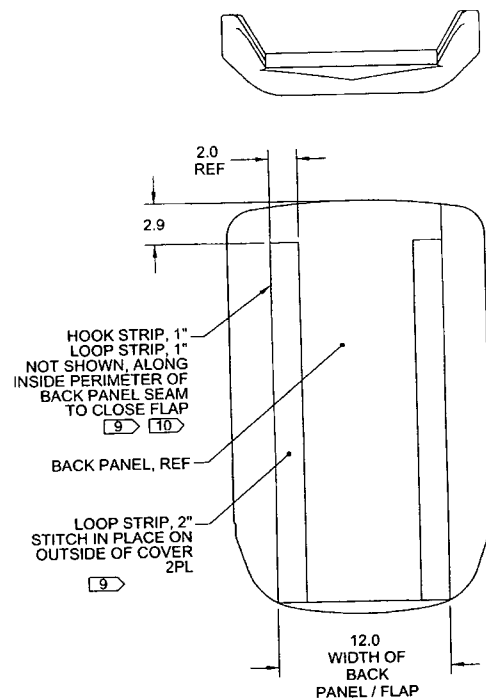
- 1) MATERIAL: N/A
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: NONE
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3756-041" USING LABEL
- 7) WEIGHT: 4.2 lbs
- 8) SEW D3756-1 COVER TO FIT D3754-1 FOAM
- 9) STITCHING: 4-6 STITCHES PER INCH, USE MIN 1/2" BACKSTITCH, NO LOOSE THREADS
- 10) STITCH HOOK AND LOOP STRIP (1") ALONG EDGE OF SEAM TO CLOSE COVER, INSTALL THE LOOP STRIP ON THE TOP OVERLAPPING FLAP.
INSTALL THE HOOK STRIP ON FABRIC NEXT TO FOAM
- 11) CUSHION SHAPE / FORM / PATTERN TO CONFORM WITH TEMPLATE DT9420
- 12) TO PULL FABRIC AGAINST FOAM IN CONCAVE AREAS, STITCH FOAM TO FABRIC AS REQ'D OR BOND WITH SILAPRENE DC12906 SPRAY
GRADE HPL CONTACT ADHESIVE OR 3M 1300/1300L RUBBER AND GASKET ADHESIVE

C	UPDATE TO VIEWS/NOTES FOR RE-SHAPED D3754-1 BACK FOAM & NEW MFR. FABRIC, HOOK, LOOP, ADHESIVE CHG (D5-1); 29.75 WAS 27.00 (C1-2); REF PAR 09-030.	CP	10.02.02
B	COVER NOW CLOSED WITH SINGLE SEAM (ZN A8-1, B8-2). D3800-1-100-300 WAS D3800-1-100-650 (D8-1). D3800-3- 100-300 WAS D3800-3-100-650 (C5-1). ADD ITEM NUMBERS TO PART LIST (D8-1), 17.75 WAS 18.00 (D2-2)	CP	08.10.21
A	NEW ISSUE	CP	08.09.09
REV.	DESCRIPTION	BY	DATE
DESIGN			
DRAWN			
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	10.02.02		

DART AEROSPACE LTD
HAWKESBURY, ONTARIO, CANADA

DRAWING NO.
D3756
REV. C
SHEET 1 OF 2
TITLE
CUSHION
SCALE
NTS

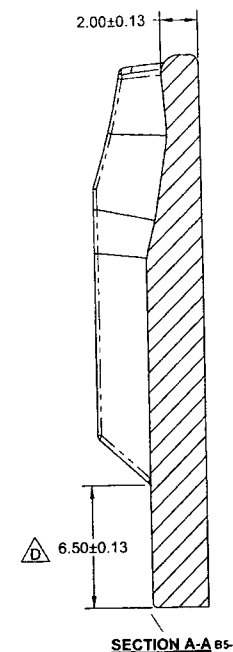
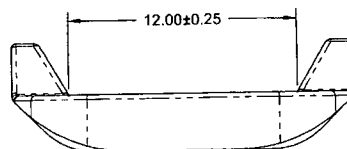
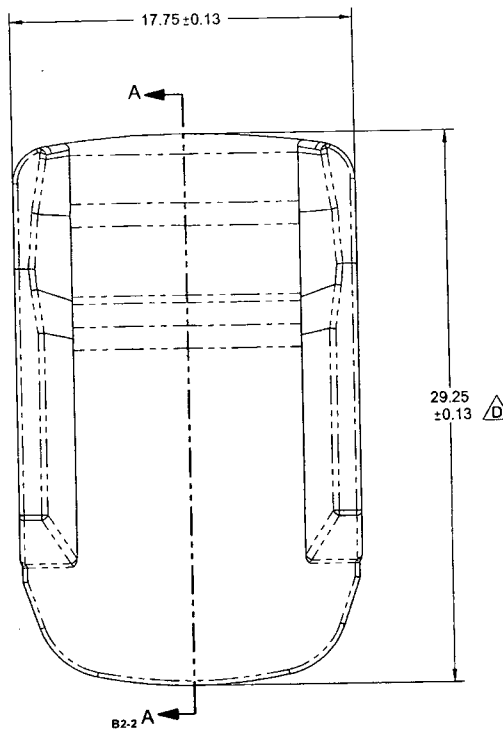
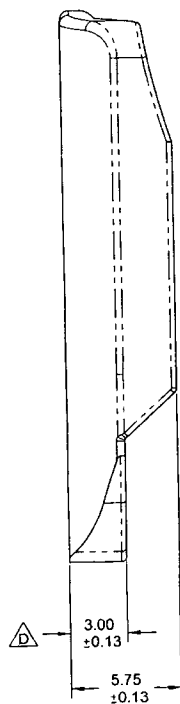
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NOT TO BE LOANED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT
WRITTEN PERMISSION FROM DART AEROSPACE LTD.



D3756-041 CUSHION

RELEASED
2010-03-23

DESIGN		DART AEROSPACE LTD	
DRAWN		HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. C
MFG. APPR.		D3756	SHEET 2 OF 2
APPROVED		TITLE	SCALE
DE APPR.		CUSHION	NTS
DATE	10.02.02	<small>COPYRIGHT © 2008 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	



D3754-1 BACK FOAM

RELEASED
2010-03-23

DESIGN		DART AEROSPACE LTD	
DRAWN		HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO. D3754	REV. D
MFG. APPR.		TITLE	SHEET 2 OF 2
APPROVED		BACK FOAM	SCALE
DE APPR.			NTS
DATE	10.02.02	<small>COPYRIGHT © 2008 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury; ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID **PO24699**

Purchase Order Date 6/20/2014

PO Print Date 6/20/2014

Page Number 1 of 2

Order From :

AEROTEX INTERIORS INC.
2340 PEGASUS WAY NE
UNIT 151
CALGARY, AB T2E 8M5
CA

VC-AER003

Ship To : DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

PAID

Contact Name

Vendor Phone

403 295 8770

Buyer

Customer POID

Customer Tax #

Terms

Currency

FOB

Chantal Lavoie

10127-2607

Net 30

CAD

FCA - (Free Carrier)

Ship To Contact

Ship To Phone

Ship Via:

FedEx PI collect

Ship Acct:

Line Nbr	Reference Vendor Part Number Line Comments Delivery Comments	Description/ Mfg ID	Req Date/ Taxable Promise Date	CD	Req Qty/ Unit of Measure	PO Unit Price	Extended Price
1	D3755-041P	Seat Cushion	7/14/2014 Yes 7/14/2014		2.00 Each	\$573.80	\$1,147.60

AS PER DWG D3755 REV. C
B121053

Line Total: \$1,147.60

2 D3756-041P

Cushion

7/14/2014
Yes
7/14/2014

2.00
Each

\$573.80

\$1,147.60

AS PER DWG D3756 REV. C
B121176

Line Total: \$1,147.60

Note:

6/20/2014



151-2340 Pegasus Way NE
Calgary, AB T2E 8M5
PH: 403.295.8770 FX: 403.313.0793
EM: info@aerotex.ca WS: www.aerotex.ca

Packing Slip

Date Packing Slip#
02/07/2014 **14-408**

Ship: Dart Aerospace Ltd.
 1270 Aberdeen Street
 Hawkesbury, ON K6A 1K7
 CANADA

Customer Phone
613.632.5200

Customer Fax
613.632.1053

Ship Via
Fedex P1

Courier Acct No.

Bill: Dart Aerospace Ltd.
 1270 Aberdeen Street
 Hawkesbury, Ontario K6A 1K7
 CANADA

Email: dbates@dartaero.com

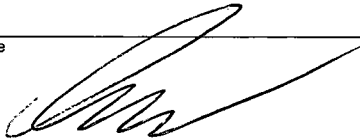

Ship Date **P.O. No.**
02/07/2014 P024699

Description	PN	ALT PN	Back Order	Shipped	Qty
SEAT CUSHION	D3755-041P				2
BACK CUSHION	D3756-041P				2
GST On Sales					

Thank you for doing business with Aerotex Interiors!

GST/HST No. 139110308

"your one stop shop for all your aircraft interior needs"
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1. Organization issuing certificate. Aerotex Interiors Inc., #151-2340 Pegasus Way NE Calgary, AB T2E 8M5		2. <div style="text-align: center; font-size: 24pt; font-weight: bold;"> CERTIFICATE OF CONFORMANCE </div>				3. Work Order / Contract / Invoice 14-408	
4. Customer Name/Address DART Aerospace LTD 1270 Aberdeen Hawkesbury, ON K6A 1K7 CANADA						5. Purchase Order PO24699	
6. Unit	7. Materials Used for Items	8. Specifications	9. Batch	10. Item	11. Part Number	12. Quantity	13. Status
1	1" Velcro Loop –Beige	D3800-1-100-700	6604-1	BACK CUSHION	D3756-041P	4	NEW
2	1" Velcro Hook – Beige	D3800-3-100-700	6604-2				
3	2" Velcro Loop – Beige	D3800-1-200-600	6261-3				
4	Fabric	Jackson GreyMix	5238				
5	Thread – Bonded Polyester Grey	14.2In Break strength	6566-3				
6	Adhesive	3M 1300/1300L Adhesive	6555				
7	Zipper	PaCanna Brass Autolock Zipper #5	N/A				
8	Foam	UC65	6307-2				
14. Remarks I certify that the materials supplied for the Purchase/Repair Order listed above conform to Aerotex Interiors' material/process specification and are in all respects in conformance with the contract requirements. I further certify that items have been fabricated to established specification to confirm with DWG. NO. D3756 Burn test requirements							
15. Signature  				16. Title <div style="text-align: center; font-size: 18pt; font-weight: bold;"> QC Manager </div>			
17. Name <div style="text-align: center; font-weight: bold;"> Jack Poovong </div>				<div style="text-align: center; font-size: 18pt; font-weight: bold;"> July 3rd, 2014 </div>			